U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

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FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 17078	2. Fiscal Year Covered From:
	1 / 1 / 2004 Through: 12 / 31 / 200
. Name and address of person filing.	4. Name, file number, and εddress of labor organization.
Name Mario R Christica	Name United United Foofers
	Labor Organization H.B. K. miller 1032-653
P.O. Box, Bidg., Room No., if any	P.O. Box, Building and Room Number, if any
· .•	
Street 6447 Torresdale Avenue	Street 6447 Torresdale Avenue
City Philadelphia	City Philadelphi:4
State Pennsylvania ZIP Code + 4 19135	State Pennsylvania ZIP Code + 4 19135
5. Position in labor organization. Local Representative	
Enter appropriate data below if, during the past fiscal year, you or your	spouse or minor child directly or indirectly had any of the following interests
A. Held an interest in, engaged in transactions (including loans) with,	
A. Held an interest in, engaged in transactions (including loans) with, monetary value from an employer whose employees your organize	or derived income or other economic benefit of
A. Held an interest in, engaged in transactions (including loans) with, monetary value from an employer whose employees your organize	or derived income or other economic benefit of zation represents or is actively seeking to represent.
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A. Held an interest in, engaged in transactions (including loans) with, monetary value from an employer whose employees your organizer. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZiP Code 1 4 S 15. Signature and verification. The undersigned declares, under penalty submitted in this report (including the information contained in any accompless).	or derived income or other economic benefit of zation represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. 7.b. Amount. 7.b. Amount. Signature y of Perjury and other applicable penalties of the law, that all of the information panying documents), has been examined by the signatory and is, to the best of the

Name of Person Filing Mario Christina	File Number U-
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organizat on represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.	
8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name	a. Labor Organization
Trade Name, if any: P.O. Box, Bldg., Room No., if any	b. Trust
Street	c. Employer
City	
7001	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dea ing.
Name Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	
Chr	11.b. Approximate dollar value of such dealing.
City	12.a. Nature of interest held or income received.
State ZIP Code + 4	
	12.b. Amount.
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.	
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	
City	
State ZIP Code + 4	
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.

FORM LM-30 Fiscal Year: 1/1/2004 – 12/31/2004

Name of Person Filing: Mario Christina

As I was not aware of the report and requirement for filing Form LM-30, for the period January 1, 2004 to December 31, 2004, accurate records of reportable occurrences were not kept for the 2004 fiscal year. If, in the future, it comes to my attention that there exists a transaction, dealing or interest that should have been reported for this period, I will immediately file an amended Form LM-30.